



GAL 3762

**TRANSMITTAL  
FORM**

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<b>TRANSMITTAL FORM</b> (To be used for all correspondence after initial filing)	Application Number	09/586,054
	Filing Date	June 2, 2000
	Confirmation Number	5574
	Inventor(s)	HILL et al.
	Group Art Unit	3762
	Examiner	Unknown
Total Number of Pages in This Submission: 4	Attorney Docket No.	98-37

**ENCLOSURES** (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (submit in duplicate) <input type="checkbox"/> Fee Attached \$ <input type="text"/> Check No.: <input type="text"/> <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Cited References <input type="checkbox"/> Search report <input type="checkbox"/> Drawing(s): Number of Pages _____ Number of Figs. _____ and cover sheet <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Cover Sheet <input type="checkbox"/> Drawing Change Authorization Request and Amended Figure(s) <input type="checkbox"/> Licensing - related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Address <input type="checkbox"/> Terminal Disclaimer(s) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Issue fee Transmittal Form PTOL- 85(b) + (c) and cover sheet <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund <input type="checkbox"/> Response to Missing Parts/ Incomplete Application
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**Current Due Date:** None**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Individual and Company	Michael W. Haas, Reg. No. 35,174 RESPIRONICS, Inc., 1501 Ardmore Boulevard, Pittsburgh PA, 15221
Signature	<i>Michael W. Haas</i>
Date	January 11, 2001

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence and all enclosures are being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents, Washington, D.C. 20231 on this date: January 11, 2001.

Typed Name	Michael W. Haas, Reg. No. 35,174		
Signature	<i>Michael W. Haas</i>	Date	January 11, 2001